

P/IR-2905(2-2719)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

New York, New York

Sergio MORINI et al.

Date: July 20, 2004

Serial No.: 09/975,946

Group Art Unit: 2819

Filed: October 15, 2001

Examiner: Daniel D. Chang

For: DIGITAL LEVEL SHIFTER WITH REDUCED POWER  
DISSIPATION AND FALSE TRANSMISSION BLOCKING**FEE ONLY**Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450PETITION AND FEE FOR AUTOMATIC EXTENSION OF TIME  
UNDER 37 CFR 1.17, 1.136(a) AND 35 USC 41(a)8

Sir:

Applicant(s) hereby petition(s) the Asst. Commissioner for Patents to extend the time for filing a response to the outstanding Office Action by one month(s). Enclosed is our check No. \_\_\_\_\_ which includes the amount of \$ \_\_\_\_\_ for the petition fee in accordance with 37 CFR 1.17 computed as:

\_\_\_\_ Response within first month  
☒ X not small entity (\$110) \_\_\_\_ small entity (\$55)

If this petition is inadequate to avoid abandonment, the Assistant Commissioner for Patents is petitioned, under 37 C.F.R. §1.136(a), to extend the time by the number of months which will avoid abandonment under 37 C.F.R. §1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 15-0700.

I hereby certify that this correspondence is being transmitted by Facsimile to (703) 872-9306 addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Respectfully submitted,

Lawrence A Hoffman  
 Name of applicant, assignee or  
 Registered Representative

*Lawrence A Hoffman*  
 Signature

July 20, 2004  
 Date of Signature

LAH:cw

*Lawrence A Hoffman*  
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**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

09975846

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	
INDEPENDENT CLAIMS	minus 3=	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	21	Minus	21	=
Independent	3	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL		OR	TOTAL	

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	21	Minus	21	=
Independent	3	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.